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PATENT APPLICATION

Attorney Docket No. D/A0592Q

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: TRANSFIX COMPONENT HAVING MICA-TYPE SILICATE OUTER LAYER

the specification and claims		d onas U.S. App	blication No	
I hereby state that I have rethe claims.	viewed and understand	the contents of the above-	identified specification, including	g
I acknowledge the duty to Code of Federal Regulations		hich is material to the pat	entability as defined in Title 3	7,
	ed below, and have als	so identified below any fore	any foreign or U.S. Provisiona sign application(s) or Provisiona nich priority is claimed;	
Prior Foreign or U.S. Provisi	onal Application(s)			
(Number) (Country)		(Day/Month/Year Filed)		
	Reg. No. 22,833; Reg. No. 22,833; Reg. No. 26,402; Reg. No. 31,342; Reg. No. 36,784;			

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

910-333-3682

Xerox Square 20A

Rochester, New York 14644

DECLARATION AND POWER OF ATTORNEY, continued

Name of sole or first inventor:

Santokh S. Badesha

Inventor's Signature:

48 Bromley Road, Pittsford, NY 14534

Residence: Citizenship:

USA

Mailing Address: (Same as above)

Name of second joint inventor:

Edward L. Schlugter, Jr.

inventor's Signature:

Residence:

53 Glenside Way, Rochester, New York 14612

Citizenship: USA Date:

Mailing Address: (Same as above)